

KING COUNTY ALCOHOLISM AND SUBSTANCE ABUSE  
ADMINISTRATIVE BOARD

REGULAR MEETING

July 15, 2003

**Members Present:** Linda Brown, Joan Clement, Nancy Code, Jim Harbaugh, Larry Hill (awaiting Council confirmation), Bob Seidensticker

**Members Absent:** Pam Detrick (unexcused), Roger Goodman (excused), Kim Murrillio (excused), Yasmin Smith (unexcused), Scott Strawn (on leave of absence)

**Staff Present:** Cindy Bergh, Sherry Hamilton, Geoff Miller, Rhoda Naguit, Jim Vollendroff

**Guests Present:** Harvey Funai, Deb Schnellman, Division of Alcohol and Substance Abuse; Carol Hoeft, Therapeutic Health Services; Frank Irigon, WAPIFASA; Pat Knox, Recovery Centers of King County; Heather Reitmeier, Susan Schoeld, Ruth Dykeman Youth & Family Services; Al Sweeten, Seattle Indian Health Board, Darryl Swenson, observer

---

Board Chair Linda Brown convened the regular meeting of the King County Alcoholism and Substance Abuse Administrative Board (KCASAAB) at 12:05 p.m. The meeting was held at the conference room of the Dutch Shisler Sobering Service Center.

I. WELCOME AND INTRODUCTION

Board Chair Linda Brown welcomed everyone and then asked everyone to introduce him/herself.

II. REVIEW/APPROVAL OF MEETING MINUTES

Joan Clement made a motion, which was seconded by Bob Seidensticker, to approve the June 17, 2003 board meeting minutes as submitted. The motion passed and was unanimously approved.

III. AGENCY PRESENTATION

A. Ruth Dykeman Youth and Family Services

Heither Reitmeier, Clinical Programs Manager of Ruth Dykeman Youth and Family Services gave a brief history of the agency and distributed copies of the information brochure.

Her report is summarized below:

**Successes:**

RDYFS has been able to maintain and expand its large variety of services ranging from early prevention to intervention and treatment despite the state of economics and instability of funding streams. They recently added a gay lesbian, bi, questioning, and transgender youth group that meets weekly at the agency. The agency also maintains a diversion program and first time offenders program. It had just wrapped up the last of three 13-week Strengthening Multi-ethnic families and communities parenting courses.

The agency is successful in addressing youth with multiple and occurring issues on individual basis by maintaining a full staff of dually certified master's level mental health/CDP clinicians.

**Challenges:**

There is a need for a steady funding and cross-trained clinicians. A certification process for dually trained clinicians would help. It is also very challenging to work with low-income youth who are eligible for medical coupons whose families do not wish to access this resource.

Another challenge is accessing payment for psychiatric evaluations. In order to get paid for tier psychological evaluations for youth, the agency must work with two separate and paperwork heavy systems.

**Challenges Being addressed:**

Issues the agency is addressing include: diversifying funding opportunities and, increasing utilization of medical coupons, utilizing the mental health data system to confirm coverage on medical coupons, and the point share data system through the agency's relationship with the local youth health center to identify individuals who are eligible/covered more quickly, screening for eligibility at intake and notifying families of the resources they qualify for, helping them sign up either electronically or by telephone, and encouraging families to access medical coupon coverage when they do qualify.

Staff support and development initiatives include weekly cross-training in-service training sessions that address integrated clinical services for teens and their families; and increasing as much as possible the training budget to help cover the costs of Master's level clinicians becoming Chemical Dependency Professionals (CDPs). The agency is working to increase diversity among the staff.

In response to the high rate of COD among youth, the agency is advocating for treatment dollars and medical coupons to cover psychiatric evaluations.

**Things that would help the agency address challenges more effectively:**

Financial assistance for training would be very helpful. The State used to offer free courses to ethnic minority populations who wanted to become CDPs. The agency is always looking for steady funding sources particularly for technical resources such as the point share system for accessing medical coupon eligibility. Currently the agency has to pay for the electronic technical resources through other contracts.

**Treatment completion rates:**

The treatment completion rate has been approximately 60% over the past year and has been as high as 89% in the past 5 years. Copies of TARGET report were distributed.

**Outcome evaluation process:**

The Outcome Evaluation is an on-going process. A copy of the agency policy and process were distributed. There are many layers of evaluation. Evaluation approaches include client satisfaction surveys, a suggestion box, measuring progress towards treatment goals every 30 days at treatment plan review, and to analyzing TARGET reports for treatment completion rates and types of discharges.

**Title XIX utilization:**

About 65-70% of clients is on medical coupon or is Title XIX eligible. The other 30% are private pay or county funded. TARGET reports attached with the handouts contain data from this past year and from the 2000-2001 year.

Jim Vollendroff asked how the agency is able to get their high rate of treatment completion. Heather thinks it is due to case management, providing incentives for attendance and working with their clients where they are; no one is refused treatment if they are willing to go through it. The agency has a full time phone person assigned to tap Title XIX eligibility. The agency also does outstation outreach. Jim also asked where their staff gets training to be dually certified. Heather responded that they use the State DASA-sponsored COD training. She is not aware of any schools in the area that offers this training.

B. Consejo Counseling and Referral Services

Failed to attend.

#### IV. CHAIR'S REPORT

##### A. 2003 Volunteer Board Recruiting & Marketing Plan

Sherry Hamilton reviewed a Division-wide Recruitment and Marketing Plan designed to increase diverse representation in all seven boards in the Division. There are specific requirements on diversity – age, gender, geographic, ethnic and cultural perspective.

An important key in marketing the board is to define the mission and work of the board. This could be done with a work plan and a list of board accomplishments. Jim commended the board for their input in shaping the RFP process. This is definitely an important accomplishment of the board this year.

Some recruitment ideas are to connect with other boards and cross-pollinate with these boards to get individuals who might be interested in substance abuse or chemical dependency issues. The Board's Webpage could be improved. Sherry suggested for board members to write articles for the Website with Board Chair's welcome remarks. The current Website is staff-driven. There is a need for more board involvement to improve the marketing of the board via modern technology. There is also a need to focus on community outreach. Board members are encouraged to go out and talk to the community by offering to speak in any community-sponsored meetings. The board needs to make an effort to find appropriate venue to talk about substance abuse. We could utilize our local cable TV for spot ads or for brief presentation of substance abuse issues. Jim Vollendroff and Cindy Bergh are scheduled to appear at CTV some time this month to talk about substance abuse issues and services provided.

Bob Seidensticker inquired if the department has tapped the *Leadership of Tomorrow* for potential members. Sherry responded in the affirmative. The Board was fortunate to get Bob Seidensticker in this way.

Sherry was asked what the board could do to intensify board recruitment. Her response was that it depends on skills and talents that each board member has to offer. Some have a gift of writing; some with a gift of speaking, that could do a 5-minute presentation about the board; some could offer technical assistance; and some are gifted with organizational skills.

Pat Knox expressed her appreciation to the board for their active participation in attending providers meetings and for looking at agencies' needs objectively.

Board Chair Linda Brown recommended further discussion of the draft document at the next board meeting.

C. Review of Board Planning Retreat

In reviewing items discussed at the last planning retreat, the following updates were noted:

- The CD RFP process: It is gratifying to note that the CD RFP released on July 3<sup>rd</sup> reflected the input provided by the board at the last planning retreat.
- The Orientation Manual: This manual for new board members is almost complete. Jim and Linda were able to use it for the first time with our newly appointed members, Kim Murillo and Larry Hill. Larry commented that the orientation manual was very helpful, particularly the County organizational chart and a list of acronyms. The development and completion of the orientation manual is another board accomplishment this year.
- Creation of Sub-committee: Linda is still working on pulling together a work group tasked to present a recommendation on how the next Needs Assessment be structured.

D. Board Liaison Report

- **Nancy Code: Adult, and ADATSA-Residential Providers Meeting and Children and Family Commission**

Nancy Code described the Adult and ADATSA-Residential Providers Meeting as remarkable, efficient, and informative meeting. At the June 18<sup>th</sup> meeting, Robert Mark of the Department of Public Health made a presentation; Jim Vollendroff informed the providers about a major change in the Medicaid billing requirement that allows CDPs to sign off on the "written recommendation for treatment by a health care practitioner" required by Medicaid regulations. Other topics included a discussion of the difficulties agencies face in finding dually certified staff, and how completion rate should be defined.

At the recent Children and Family Commission meeting, Ms. Marshall reported on Day Reporting Center. The group also discussed budget issues.

- **Linda Brown: Chronic Populations Advisory Council (CPAC) and King County Mental Health Advisory Board**

There was no CPAC meeting in July.

At the King County Mental Health Board meeting on July 8<sup>th</sup>, Amnon Shoenfeld, MHCADS Division Director, shared the good news that, overall, the mental health and substance abuse budgets remained intact. The board thanked Amnon and staff for tracking the budget and advocating for mental health and substance

abuse funding. The COD Tier services for jail population had been contracted to Community Psychiatric Clinic (CPC) and Seattle Mental Health (SMH). SMH has just been certified by State DASA as a chemical dependency provider.

- **Roger Goodman, Legislative Advocacy and Public Affairs Committee**

In place of Roger Goodman, who was out of town, Geoff Miller reported that at the June 25<sup>th</sup> meeting of the Legislative Advocacy and Public Affairs Committee, there was a lively discussion on how to streamline and revitalize the committee. A motion was made to rotate the Chair and Vice Chair in place of current dual chairs from both boards. Roger Goodman of King County Alcoholism and Substance Abuse Administrative Board (KCASAAB) was elected Chair, and Eleanor Owen of King County Mental Health Advisory Board (KCMHAB) as Vice Chair. Their term is from June 2003 to June 2004. Next year, the chair will come from KCMHAB.

The Legislative Forum will be held on November 18<sup>th</sup> at 7:30-9:00 p.m. at Kirkland Performing Arts Center. Registration will be at 7:00 p.m. The committee will discuss the agenda for this forum at the next meeting.

Linda said that Kim Murillo is interested in joining this committee.

## V. COUNTY COORDINATOR'S REPORT

### A. CD RFP

The CD RFP Bidders Conference was held this morning at the Exchange Building with 54 people in attendance. It was an opportunity for the bidders to ask questions on items that need clarifications. A list of questions-answers will be provided to the board within this week.

There will be 3 review panels – one for youth, one for adult and one for ADATSA. Board members interested in being on a review panel should contact Linda Brown. Other members of the panels include the CD contract monitors, Public Health staff, Criminal Justice, specifically drug court and Juvenile. There will be one formal meeting of each review panel and a follow up meeting if needed.

The board commended Jim for a well-done document. Linda encouraged Board members to volunteer for review panels.

### B. Criminal Justice Initiative Pilot Project Update

Dave Murphy is doing an excellent job in coordinating the various initiatives, and working closely with jail staff, the courts and chemical dependency and mental health providers as Program Manager of Criminal Justice Initiatives. This week,

Lucia Meijer, former Administrator of the North Rehabilitation Facility, was hired as a temporary staff person to manage the assessment process and assessment tool identification/development for the pilot project. Additionally, Debra Srebnik, Ph.D., was hired as the part-time project evaluator to monitor the outcomes of each initiative.

C. 25 Cities Initiative

The initiative, sponsored by the Office of Nation Drug Policy, focuses on 25 of the largest U.S. cities, including Seattle, that together comprise a substantial share of the substance abuse problem in the country. With the able assistance of Patrick Vanzo, a group of policy makers in Seattle and King County is being organized to assess community coordination and the accomplishment of shared goals.

D. Adult Residential CD Beds

The Division together with the King County Superior Court Drug Court Program is contracting with residential providers for adult residential chemical dependency treatment services, including: intensive inpatient, long-term treatment and recovery house. Funding for these services is available as a result of sentencing reform. In King County, these funds will be used to provide "on demand" residential treatment services for drug court clients.

E. CD Report Card

The report card is simple and informative. It also shows trends for each element of service that relates to the populations served, the amounts expended, and dispositions. The report card will focus on services provided with funds allocated by King County. The intended audience for the Report Card is the entire community, the Board, and treatment agencies.

F. DASA Project Treatment Analyzer

This is an exciting project. State DASA has done a demonstration of this electronic devise.

VI. OTHER CONCERNS/NEW BUSINESS

A. Prospective Residential Provider

Jim Vollendroff reported that he met with Marlo Christiansen, a philanthropist, this morning. Mr. Christiansen owns and operates "Welcome Home", a private organization from Vancouver, B. C. He bought a house in Lake Forest Park and a separate training facility in Aurora Avenue and Highway 99 with a goal to get

500 people to be trained in cottage industry. He has expressed interest in providing housing and job training for drug court clients.

B. Recovery Month

Deb Schnellman of State DASA passed out Recovery Month package. She encouraged the board to be a "voice" for this event. It would be great if the board could put an editorial comment in the newspaper to raise awareness of stigma associated with substance abuse. Jim is meeting with Sherry for brainstorming regarding possible activities to promote Recovery Month. Linda will email board members to come up with ideas on how to contribute on Recovery Month.

C. Regional Meetings

Harvey Funai handed out copies of the schedule and agenda for Regional Meetings. This is an opportunity for anyone to connect with DASA Director, Ken Stark.

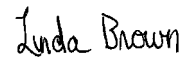
There being no further business, the meeting was adjourned at 1:36 p.m.

Prepared by:

Rhoda A. Naguit  
Recording Secretary

RAN:LB:ran

Attested by:

  
Linda Brown  
Board Chair